



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER OF PATENTS AND TRADEMARKS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 5632

SERIAL NUMBER 09/469,987	FILING OR 371(c) DATE 12/21/1999 RULE	CLASS 370	GROUP ART UNIT 2665	ATTORNEY DOCKET NO. 10559/094001
APPLICANTS MARK L. SKARPNES, Hillsboro, OR; <i>NA</i> ** CONTINUING DATA ***** <i>NA</i> ** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 02/03/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>PA</i> Acknowledged Examiner's Signature Initials		STATE OR COUNTRY OR	SHEETS DRAWING 2	TOTAL CLAIMS 19
				INDEPENDENT CLAIMS 3
ADDRESS				
08791				
TITLE				
MODULAR BROADBAND ADAPTER SYSTEM				
FILING FEE RECEIVED 890	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



Bib Data Sheet


**UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office**

 Address: COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

SERIAL NUMBER 09/469,987	FILING DATE 12/21/1999 RULE -	CLASS 375	GROUP ART UNIT 2734	ATTORNEY DOCKET NO. 10559/094001	
APPLICANTS MARK L. SKARPNESS, Hillsboro, OR ; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** 02/03/2000					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY OR	SHEETS DRAWING 2	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 3
ADDRESS SCOTT C HARRIS FISH & RICHARDSON P C 4225 EXECUTIVE SQUARE SUITE 1400 LA JOLLA ,CA 92037					
TITLE MODULAR BROADBAND ADAPTER SYSTEM					
FILING FEE RECEIVED 890	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		